

10/18/01

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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

(Only for new nonprovisional applications under 37 CFR 1.53(b))

S100-DIV2**Greenberg**

Retinal Color Prosthesis for color sight restoration

EL 516 675 931 US

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231

- | | |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 78]
(preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 32]</p> <p>5. Oath or Declaration [Total Pages 3]</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="margin-left: 20px;">b. Specification Sequence Listing on:</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> paper</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p> |
|---|--|

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 09/515/373

Prior application information: Examiner **F. Oropeza**

Group / Art Unit 3762

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ *Customer Number or Bar Code Label*



or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

<i>Name</i>	Second Sight, LLC
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28284
PATENT TRADEMARK OFFICE

Address **P.O. Box 905**

City Santa Clarita

State	California
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Zip Code	91380-9005
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<i>Country</i>	USA
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Telephone	661-775-3995 ext. 3129
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Fax	661-775-1595
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Name (Print/Type) **Scott B. Dunbar**

Registration No. (Attorney/Agent)	37.124
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Signature

Date _____

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

Application Number --
Filing Date --
First Named Inventor Greenberg
Examiner Name --
Group Art Unit --
Attorney Docket No. S100-DIV2

TOTAL AMOUNT OF PAYMENT \$520.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number 50-0922
- Deposit Account Name Second Sight, LLC
- ☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR § 1.27
2. ☐ Payment Enclosed:
- ☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370			Utility filing fee	370.00
106	330	206	165			Design filing fee	
107	510	207	255			Plant filing fee	
108	740	208	370			Reissue filing fee	
114	160	214	80			Provisional filing fee	
SUBTOTAL (1)							\$370.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
32	-20** = 12	X 9.00 =	108.00
4	-3** = 1	X 42.00 =	42.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9			Claims in excess of 20
102	84	202	42			Independent claims in excess of 3
104	280	204	140			Multiple dependent claim, if not paid
109	84	209	42			** Reissue independent claims over original patent
110	18	210	9			** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$150.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65			Surcharge - late filing fee or oath	
127	50	227	25			Surcharge - late provisional filing fee or cover sheet	
139	130	139	130			Non - English specification	
147	2,520	147	2,520			For filing a request for ex parte reexamination	
112	920*	112	920*			Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*			Requesting publication of SIR after Examiner action	
115	110	215	55			Extension for reply within first month	
116	400	216	200			Extension for reply within second month	
117	920	217	460			Extension for reply within third month	
118	1,440	218	720			Extension for reply within fourth month	
128	1,960	228	980			Extension for reply within fifth month	
119	320	219	160			Notice of Appeal	
120	320	220	160			Filing a brief in support of an appeal	
121	280	221	140			Request for oral hearing	
138	1,510	138	1,510			Petition to institute a public use proceeding	
140	110	240	55			Petition to revive - unavoidable	
141	1,280	241	640			Petition to revive - unintentional	
142	1,280	242	640			Utility issue fee (or reissue)	
143	460	243	230			Design issue fee	
144	620	244	310			Plant issue fee	
122	130	122	130			Petitions to the Commissioner	
123	50	123	50			Processing fee under 37 CFR § 1.17(q)	
126	180	126	180			Submission of Information Disclosure Statement	
581	40	581	40			Recording each patent assignment per property (times number of properties)	
146	740	246	370			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370			For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370			Request for Continued Examination (RCE)	
169	900	169	900			Request for expedited examination of a design application	
Other fee (specify)							

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

SUBMITTED BY

Name (Print/Type)	Scott B. Dunbar	Registration No. (Attorney/Agent)	37,124	Telephone	661-775-3995 ext. 3129
Signature		Date	10/18/01		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Greenberg, et al.

Docket No.

S100-DIV2

Serial No.

Filing Date

Examiner

Group Art Unit

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JC937 J.S. PRO
10/18/01
10/18/01

Invention: RETINAL COLOR PROSTHESIS FOR COLOR SIGHT RESTORATION

I hereby certify that the following correspondence:

Divisional Patent Application

(Identify type of correspondence)


is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231 on

10/18/2001

(Date)

Emily M. Stuart

(Typed or Printed Name of Person Mailing Correspondence)


(Signature of Person Mailing Correspondence)EL 516 675 931 US

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